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5. Contents for this week's MEDNEWS:
 - Services will collect baseline medical info on recruits
 - Educators, health care professionals meet in Tokyo
 - Hospital corpsmen support joint mission in Southeast Asia
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6. Stories:

Headline: Services will collect baseline medical info on recruits

By Army Staff Sgt. Kathleen T. Rhem, American Forces Press Service

WASHINGTON - Defense medical officials are working on a plan to collect baseline health data from all recruits during their basic training.

The Recruit Assessment Program would collect comprehensive, extensive medical history and health data and will compile the information into a computer database, said Capt. Kenneth C. Hyams, director of epidemiology at the Naval Medical Research

Center in Silver Spring, Md.

"The data will be accessible through a computer network and available to doctors when they are caring for their patients throughout the patients' military career," Hyams said. "It will also be available to Department of Veterans Affairs doctors when individuals leave military service and enter the VA system."

He said the services currently collect medical information from recruits, but the RAP questionnaire is more extensive and computerized. There are no current plans to pose the same questions to those already serving, he noted.

"In the past, most of the information collected has been on paper copies. Often times those paper questionnaires get lost and aren't available to physicians when they are caring for patients later in their military career," Hyams said. "It's very important that we have a life-long medical record that doctors can use to help in the care of patients, both while they're in the military and after they enter the VA system."

All the information wouldn't be important during a recruit's early years in service, but most certainly would be critical as individuals age. For instance, women with a family history of breast cancer could be targeted for earlier preventive screenings, he said.

The initiative came in part from lessons learned after the Gulf War. It was nearly impossible to determine what ailments were service-related because no available database provide a clear picture of veterans' health before their service in the Gulf.

Once individuals are sent off to war or to a dangerous deployment such as Bosnia, it's too late to collect the baseline data needed to really understand later health problems they may have after they return, Hyams explained.

"One of the major problems in understanding the Gulf War Syndrome controversy has been the fact that we have not been able to evaluate the changes in military members' health over time," he said.

Currently, a pilot Recruit Assessment Program is being tested at Great Lakes Naval Training Center, Ill.; Lackland Air Force Base, Texas; and Marine Corps Recruit Depot San Diego. Officials are working out some issues regarding questionnaire design and automation and aren't sure when the program would be implemented dod-wide.

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Headline: Educators, health care professionals meet in Tokyo
From U.S. Naval Hospital Yokosuka Public Affairs Office

YOKOSUKA, Japan - Health care professionals and educators in mainland Japan have come together as a team to help children with special developmental needs.

Families with children who have special needs can now find comprehensive services at their hospital, clinics, and schools as part of an effort to help the Navy meet its mission.

Recently, health care professionals and educators met for a Collaborative Conference, just weeks before the start of the 2000 school season.

Capt. Jack Smith, MC, commanding officer of U. S. Naval Hospital, Yokosuka, spoke to the group about their role in supporting the Navy's readiness mission and how caring for family members brings peace of mind to military service members.

Cmdr. Robert Buckley, MC, developmental pediatrician and department head of EDIS Japan agreed. "Concern for families is important to the Fleet," he said.

"It's hard for them to be ready if they're out on a ship and worrying about their loved ones back home -- what kind of hassles is the spouse going through trying to get the needs of their children met. Having these services here is great," said Buckley.

According to Lt. Eric Acoba, MC, Iwakuni's Physical Therapist and EDIS Specialty Coordinator, "Part of my job is not only dealing with the beneficiaries in terms of children, but I also work with the active duty Marines, as well. So I see the whole spectrum."

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Headline: Local hospital corpsmen support joint mission in Southeast Asia

By Judith Robertson, Naval Hospital Bremerton

BREMERTON, Wa. - Digging dirt in 90 percent humidity for seven weeks is not the job of a hospital corpsman. Yet, independent duty corpsmen from Naval Hospital Bremerton have been lining up to volunteer for the job.

"My mission was to provide primary and emergency medical care primarily to the team, then for Vietnamese workers, then to local villagers," said HMCM Karl Matous, the most recent volunteer to tour with the Joint Task Force-Full Accounting Team and Central Identification Laboratory (CIL), Hawaii. "But if you aren't involved in your primary job, and I was fortunate there weren't a lot of medical problems, then you dig dirt," Matous added.

By volunteering as the medic, Matous spent seven weeks in a triple canopy jungle in Vietnam as part of a 12-member team designed to search, recover and identify remains of American personnel, unaccounted for from World War II, Korean War, Vietnam War and other conflicts and contingencies.

"We were digging up and sifting through an area that had the potential to contain aircraft debris and possible human remains," said Matous. "Anything we found was transported back to Hawaii where they have DNA capability and dental and medical records."

It could take as long as six to ten months before any type of identification is made, but according to statistics by the CIL there have been 12 WWII, 38 Vietnam War, four Korean War and two Cold War remains identified since January 2000.

The field activities to Vietnam, Laos and other historically war-torn areas take place nearly six times a year with multiple teams being dispersed to different locations for 30-days at a time.

If there was any question in Matous' mind about why he was spending a month of his life digging dirt in Vietnam, it all

became perfectly clear. It was to give closure to families and friends of those who sacrificed their lives. This is the message that Matous gave to HMCS Malcolm Jacobs, the next in a long line of volunteers who will support the mission.

"Not too many people in my generation have had the opportunity to go to Vietnam. We grew up seeing it on TV. This mission gives me the opportunity to do what I joined the Navy to do - go to another country, meet other people, and do a good deed," said Jacobs.

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Headline: Joint exercise sees eye care mission in Indonesia
By Bill Doughty, U. S. Naval Hospital Yokosuka

YOKOSUKA, Japan - Optometrist Lt. Andrew Kim, MSC, traveled to Indonesia this summer as part of a medical team mission in support of "CARAT 2000."

He and a small team conducted eye evaluations and provided spectacle lenses to needy Indonesians in rural Asembagus, East Java. According to Kim, they provided 1,514 eye evaluations and made 1,293 eyeglasses on site.

"By providing optical and surgical treatment to patients with reduced vision, the team had an exceptional improvement on quality of life for hundreds of people who would otherwise have had no treatment options," said Kim.

Glasses were made and distributed within 30 minutes of the patient's exam.

Two corpsman worked solely in the lab to scope, block, cut, and assimilation the glasses.

"Personally, this was an extraordinary experience for me. Although we might take reading glasses for granted, I saw tears coming down from the eyes of an elderly woman who, for the first time, had an experience of seeing clearly," said Kim. "It was an amazing experience. It is truly about helping less fortunate people in the world."

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Headline: Medical center captures Navy award
From Naval Medical Center Portsmouth Public Affairs Office

PORTSMOUTH, Va. - Naval Medical Center, Portsmouth, was selected for the Navy-wide Rear Admiral William Thompson Award for public affairs excellence in the Special Events, Observances and Special Publics category.

The selection was based on media and internal and external public relations in promoting the opening of the Charette Health Care Center in April 1999. "The opening of the new Charette Health Care Center represents a superb quality of life enhancement for the military community of Hampton Roads," said Rear Adm. Marion J. Balsam, Commander, NMC Portsmouth. "Promoting the hospital's technological sophistication and patient amenities which are second to none was a high priority in prededication activities."

The award was given for unique activities aimed at directing the public's attention to the dedication of the \$330 million state-of-the-art facility and the impact it would have

for the over 420,000 Tidewater military beneficiary population including active duty, dependents and retired personnel.

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Headline: Anthrax question and answer

Question: If you receive all the shots, are you 100 percent protected?

Answer: The antibodies that result from any vaccine can be overwhelmed if one is exposed to extremely large doses of any pathogen. Even if vaccinated, one may not be completely safe if one is close to the biological agent release point. Antibiotics for such people will offer additional protection. That's why vaccination is only one part of the force health protection efforts, which also includes protective gear and detection equipment. For continued protection, annual booster doses are required.

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Headline: TRICARE question and answer

Question: Does the enrollment fee for TRICARE Prime have to be paid all at once, or can it be paid in installments?

Answer: It is permissible to pay the Prime enrollment fee in quarterly installments. There is no additional administrative fee for quarterly payments.

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Headline: Healthwatch: Keep those diseases at bay with immunizations

By Lt. Cmdr. Scott Clements, Naval Hospital Pensacola

PENSACOLA, Fla. - Increasing concerns have been raised about the safety and need for vaccinations to control infectious diseases.

Primarily, modern medicine relies on antibiotics and vaccines to combat infections from bacteria and viruses. Vaccines prime the immune system to respond quickly to invading bacteria or viruses. It's used to halt infection before symptoms occur.

Antibiotics work by killing bacteria already infecting the body and causing symptoms.

Antibiotics are not effective against viral diseases. A single antibiotic may work against many kinds of bacteria, while vaccines are designed against a specific disease.

In America, many once-feared childhood diseases are becoming rare. Some have suggested that vaccination is no longer necessary.

Despite the decrease in North America, vaccine preventable diseases such as measles, polio, and whooping cough continue to infect and kill children throughout the world.

Only by continuing to actively immunize children will these scourges be kept at bay. Other parents worry when multiple vaccinations are given at one time, fearing an increased risk of severe reactions to the vaccines or that they may not be as effective when combined.

Routine childhood vaccines are given according to a

schedule. Sometimes the question arises about whether to given an immunization when the child is ill. The experts do not recommend delaying vaccinations due to mild illnesses such as colds, ear infections or mild diarrheal disease.

Vaccinations should also proceed if the child has been exposed to an infection or is taking antibiotics for an illness.

The American Academy of Pediatrics considers immunizations a priority in children's health and more information about specific vaccines is available at the web site (www.aap.org). For more information on pediatrics and immunizations go to the Naval Hospital website (psaweb.med.navy.mil/pted/pediatrics.htm).

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